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STATEMENT OF

RECEIVED
SECRETARY OF THE SENATE PUBLIC RECORDS

FORM 1	ORGANIZATION	13 APR 22 PM 3: 42
NAME OF COMMITTEE (in	full) (Check if name Example: If typing, typing is changed) over the lines.	Office Use Only De 12FE4M5
Bill Cassid	y for US Senate	
ADDRESS (number ar	PO Box 80505 d street)	
(Check if ad is changed)	dress Baton Rouge	LA
	CITY	STATE ZIP CODE
COMMITTEE'S E-MA (Check if a is changed		
COMMITTEE'S WEB (Check if a is changed		
2. DATE 04	16 2013. ATION NUMBER	
4. IS THIS STATEM	IENT NEW (N) OR AMENDED (A)
I certify that I have ex	xamined this Statement and to the best of my knowledge and be	lief it is true, correct and complete.
Type or Print Name o	f Treasurer Ralph Stephens	
Signature of Treasure		Date 04 16 2013
NOTE: Submission of fa	alse, erroneous, or incomplete information may subject the person sig	
Office Use Only	For further informate Federal Election Control Toll Free 800-424-95 Local 202-694-1100	nmission FEC FORM 1